

# Best Available Copy

ISSUE SLIP STAPLE AREA (for internal cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	O.B.	2000	10-7-00
O.I.P.E. CLASSIFIER	10	/	10/12
FORMALITY REVIEW	7143	/	10/12

## INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	Original
1	6/29/03
2	11/1/03
3	CX
4	11/1
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Claim	Date
Final	Original
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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